FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Number:				
OMB Number:	3235-0076			
Estimated average	burden			

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				dicate change.)	93	3//12		
Offering of Limited	Partnership Interests of N				7.2			
Filing Under (Check I	box(es) that apply):	□ Rule 504	□ Rule 505	⊠ Rule 506	Section 4(6)) DIOF		
Type of Filing:	☐ New Filing					PROCESSED		
Offering of Limited Partnership Interests of Meridian Horizon Fund, L.P. Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE								
Filing Under (Check box(es) that apply):								
			has changed, and inc	licate change.		THOMSON		
Meridian Horizon Fu	und, L.P.					FINANCIAL		
Address of Executive	Offices		(Number and Stree	t, City, State, Zip C				
c/o Meridian Capita	A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer ame of Issuer							
	Imple Processed Processe							
Brief Description of E	Business: Investment	in securities throu	igh a diverse group	of investment ma	nagers.			
Type of Business Or	ganization							
		Ilmited	partnership, already	formed	other (please	specify)		
1	☐ business trust	☐ limited	partnership, to be for	med	<u> </u>			
			Month	Ye	ar			
Actual or Estimated	Date of Incorporation or Org	ganization:	0 6	9	1 🛛	Actual		
			Postal Service Abbre	eviation for State;	,-			
•	-				diction)	D E		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5-05)

		A. BASIC II	DENTIFICATION DAT	Α	
Each beneficial owrEach executive office	e issuer, if the issuer having the power and director o	suer has been organized wi wer to vote or dispose, or di	thin the past five years; rect the vote or disposition co orporate general and manag	of, 10% or more of ping partners of pa	a class of equity securities of the issuer; rtnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☑ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Meridian Capital Par	tners, Inc.		
Business or Residence Addi	ess (Number and	Street, City, State, Zip Coo	de): 20 Corporate Woo	ds Boulevard, 4 th	Floor, Albany, NY 12211
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Lawrence, William H			
Business or Residence Addr Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Coo	de): c/o Meridian Capit	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Halldin, Donald J.			
Business or Residence Addr Floor, Albany, New York 12		Street, City, State, Zip Coo	le); c/o Meridian Capit	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	⊠ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Sica, John			
Business or Residence Addr Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Coo	de): c/o Meridian Capit	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Hickey, Timothy M.			
Business or Residence Addr Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Cod	le): c/o Meridian Capit	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	findividual):	Smith, Laura K.		- · <u>-</u>	
Business or Residence Addr Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Cod	le): c/o Meridian Capit	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, in	findividual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Cod	le):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	findividual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Cod	le):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

		.!			B. I	NFORM	ATION .	ABOUT	OFFERI	NG			
1. Has	the issuer	sold, or d	oes the iss	suer intend	to sell, to Answer a	non-accre	edited inve	stors in thi	s offering? ling under	 ULOE.	•••••	☐ Yes	⊠ No
2. Wh:	at is the mi	nimum inv	estment th	nat will be					•			-	000,000**
	·											** may	be waived
3. Doe	s the offeri	ing permit	joint owne	ership of a	single unit	?			**********			⊠ Yes	□No
any offe	er the information commission of the commission	on or simila erson to b state or sta	ar remune e listed is ites. list the	ration for s an associa e name of	solicitation ated perso the broker	of purchas n or agent or dealer.	sers in con of a broke . If more t	nection wi er or deale nan five (5	in saies of registered) persons t	secumes I with the S o be listed	in the SEC Lare		
Full Nam	e (Last nar	me first, if	individual))									
Business	s or Reside	nce Addre	ess (Numb	er and Str	eet, City, S	State, Zip C	Code)				<u>.</u>		
Name of	Associated	Broker o	r Dealer		 			-					
States in	Which Per leck "All Sta	rson Lister	d Has Soli	cited or Int	tends to So	olicit Purch	nasers					<u> </u>	☐ All States
[AL]	[AK]	[AZ]			☐ [CO]						☐ (HI)	□ [iD]	
	□ [IN]	[IA]	☐ [KS]	☐ [KY]	□ [LA]	☐ [ME]	[MD]	[MA]	[MI]	[MN]		[MO]	
□ [МТ]	☐ [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	□ (NC)						
[RI]	□ [sc]		[NT]	[xT] □	[תח]		[AV]	□ [WA]	[WV]		[WY]	[PR]	
Full Nan	ne (Last na	me first, if	individual)	 								
Busines	s or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (Code)			•			
Name o	f Associate	d Broker o	or Dealer				===.			_			
States in		rson Liste	d Has Soli	cited or In	tends to S	olicit Purch	nasers				-		☐ All States
[AL]					[co]								
	[IN]	[AI]											
☐ [MT]	[NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [ИҮ]	☐ [NC]			□ [OK]			
□ [RI]	☐ [SC]		□ [TN]	[גז]			□ [VA]	□ [WA]	[VW]	[WI]	[WY]	□ [PR]	
Full Nar	ne (Last na	me first, if	findividual)									
Busines	s or Reside	ence Addr	ess (Numb	per and St	reet, City,	State, Zip	Code)						
Name o	f Associate	ed Broker	or Dealer					-					
States i	n Which Pe heck "All Si	erson Liste tates" or c	ed Has Sol heck indivi	icited or In	ntends to S	olicit Purc	hasers			•••••			☐ All States
[AL]		[AZ]			☐ [CO]				[FL]	☐ [GA]	☐ [Hi]	[ID]	
	[NI]	□ [IA]	☐ [KS]	[KY]	☐ [LA]	☐ [ME]	☐ [MD]	[MA]	[MI]	☐ [MN]	[MS]	[MO]	
		□ [NV]	☐ (NH)	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	□ (OH)		□ [OR]	[PA]	
□ [RI]	[SC]	□ [SD]	[NT]	[גז] □	□ (UT)		□ [VA]	[WA]	[VV]			□ (PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \[\] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Aggregate		Amount Already
	Type of Security		Offering Price		Sold
	Debt	\$	0	\$	0
	Equity	<u>\$</u>	0		. 0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	. <u>\$</u>	0	<u>\$</u>	0
	Partnership Interests	. <u>\$</u>	5,000,000,000	<u>\$</u>	716,776,621
	Other (Specify)	. \$	0	\$	00
	Total	\$	5,000,000,000	\$	716,776,621
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	·	198	<u>\$</u>	716,776,621
	Non-accredited Investors			\$	
	Total (for filings under Rule 504 only)			\$	_ 0_
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		n/a	<u>\$</u>	n/a
	Regulation A		n/a	<u>\$</u>	n/a
	Rule 504		_n/a	<u> </u>	n/a
	Total		n/a	<u>\$</u>	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0_
	Legal Fees			\$	50,000
	Accounting Fees			\$	100,000
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total			\$	150,000
	lotal				

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPE	NSES .	AND USE OF PROC	EEDS		
4	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C-Question 4.a. This differen	ce is the		<u>\$</u>	4,999,850,0	<u>00</u>
5	Indicate below the amount of the adjusted gross procee used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. It the adjusted gross proceeds to the issuer set forth in res	any purpose is not known, fumish a The total of the payments listed mus	an st equal	Payments to Officers, Directors & Affiliates		Payments to Others	ı
	Salaries and fees			\$		\$	
	Purchase of real estate			\$		\$	
	Purchase, rental or leasing and installation of ma	achinery and equipment		\$		\$	
	Construction or leasing of plant buildings and fa-	cilities		\$		\$	—
	Acquisition of other businesses (including the va offering that may be used in exchange for the as pursuant to a merger	sets or securities of another issuer		\$		<u>s</u>	
	Repayment of indebtedness			\$		\$	
	Working capital			\$		\$	
	Other (specify): Investment in Partnership Inters	ests		<u>\$</u>	\boxtimes	\$ 4,999,850,0)00
				\$		\$	
	Column Totals			<u>\$</u>	\boxtimes	\$ 4,999,850,0	200
	Total payments Listed (column totals added)			⊠ <u>\$</u>	4,999	9,850,000	
		D. FEDERAL SIGNATUR	RE				
CC	is issuer has duly caused this notice to be signed by the nstitutes an undertaking by the issuer to furnish to the U the issuer to any non-accredited investor pursuant to pa	.S. Securities and Exchange Comm	n. If this iission, u	notice is filed under Rule pon written request of its s	505, the	e following signature information furnis	re hed
	suer (Print or Type) eridian Horizon Fund, L.P.	Signature // // // // // Signature // // // // // // // // // // // // //	12	Da	ite	0/11/06	,
В	ame of Signer (Print or Type) y: Meridian Capital Partners, Inc., General Partner y: Laura K. Smith	Title of Signer (Print or Type) Managing Director – Operation	ons				
			· ·				

ATTENTION

		E. STATE SIGNATURE	
1.	Is any party described in 17 CFR 230.262 present provisions of such rule?	ntly subject to any of the disqualification	Yes No
	See App	pendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to fur (17 CFR 239.500) at such times as required by s	nish to any state administrator of any state in which this notice tate law.	e is filed a notice on Form D
3.	The undersigned issuer hereby undertakes to fur	nish to the state administrators, upon written request, informa	tion furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issue Exemption (ULOE) of the state in which this notic of establishing that these conditions have been s	er is familiar with the conditions that must be satisfied to be en be is filed and understands that the issuer claiming the availab atisfied.	titled to the Uniform limited Offering illity of this exemption has the burden
	suer has read this notification and knows the content rized person.	ts to be true and has duly caused this notice to be signed on it	ts behalf by the undersigned duly
	r (Print or Type) lian Horizon Fund, L.P.	Signature All Frutz	Date 10 /11/06
Name	of Signer (Print or Type)	Title of Signer (Print or Type)	
•	leridian Capital Partners, Inc., General Partner aura K. Smith	Managing Director – Operations	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APF	PENDIX				
1			3					5	<u> </u>
,	Intend to non-a	to sell	Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualification under State ULC (if yes, attach explanation of waiver granted (Part E – Item 1				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK								ļ <u>-</u>	
AZ		Х	LP Interests	1	\$1,000,000	0	\$0		X
AR									
CA	-	х	LP Interests	15	\$30,216,950	0	\$0	ļ	X
со		х	LP Interests	7	\$21,501,232	0	\$0		X
СТ		х	LP Interests	9	\$67,710,809	0	\$0		Х
DE								ļ <u> </u>	<u> </u>
DC		Х	LP Interests	2	\$2,120,000	0	\$0		X
FL		Х	LP Interests	23	\$37,094,096	0	\$0		X
GA		Х	LP Interests	3	\$1,750,000	0	\$0		X
н									
ID									ļ
IL		х	LP Interests	2	\$3,195,679	0	\$0		×
IN									
IA									ļ
KS		x	LP Interests	2	\$2,258,000	0	\$0	<u> </u>	×
KY									
LA		×	LP Interests	20	\$112,192,262	0	\$0	<u> </u>	X
ME				_					
MD		х	LP Interests	1	\$147,000	0	\$0		X
MA		×	LP Interests	8	\$24,989,197	0	\$0		X
МІ		Х	LP Interests	4	\$5,204,752	0	\$0		X
MN		х	LP Interests	1	\$266,000	0	\$0		X
MS								ļ	
МО									
MT									
NE									1
NV									
NH									
NJ	_	×	LP Interests	5	\$3,534,020	0	\$0	<u> </u>	X

		.,		AP	PENDIX			<u> </u>		
1		2	3	<u></u>		4		5		
	Intend to non-ad investors (Part B -	ccredited in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NM									<u> </u>	
NY		х	LP Interests	46	\$150,800,143	0	\$0		×	
NC	-			<u> </u>					ļ	
ND									<u> </u>	
ОН		Х	LP Interests	1	\$1,893,559	0	\$0		X	
ок		_						ļ. <u> </u>		
OR										
PA		х	LP Interests	19	\$79,490,816	0	\$0		X	
RI					<u> </u>				 	
SC				·			. <u></u>		 	
SD									<u> </u>	
TN		Х	LP Interests	4	\$34,438,110	0	\$0		×	
TX		Х	LP Interests	7	\$9,535,974	0	\$0		X	
UT							. <u> </u>		-	
VT									 	
VA		х	LP Interests	1	\$1,000,000	0	\$0		X	
WA		Х	LP Interests	10	\$39,857,843	0	\$ 0		X	
wv		х	LP Interests	2	\$5,159,426	0	\$0		X	
WI									 	
WY								ļ		
Non- US		х	LP Interests	5	\$81,420,753	o	\$0		×	